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# **New Hampshire Board of Medicine**

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# **NEWSLETTER**

**News Editor:** Penny Taylor, Administrator

**WINTER, 2003** 

#### **Election of Board Officers:**

At the January, 2003 meeting, the Board elected officers for the coming year. Cynthia S. Cooper, M.D., of Dover was reelected as President and Wassfy M. Hanna, M.D., of Portsmouth was reelected Vice President.

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#### Verification of licenses for Physicians and Physician Assistants On-Line:

In September, 2002 the Board initiated on-line verification of licenses for physicians and physician assistants. You can find out the license number, date of issue, business address, specialty, board certification and any disciplinary actions taken by the Board of Medicine. Please visit our website at www.state.nh.us/medicine and choose Physician Finder. You can verify by physician or physician assistant last name or license number.

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# **2002 New Hampshire Prevention Guidelines:**

In this newsletter you will find a copy of the 2002 New Hampshire Prevention Guidelines, published by the Foundation for Healthy Communities, and developed by the Medical Directors for New Hampshire health plans and the Department of Health and Human Services. These guidelines provide both patients and physicians with clear-cut advice about scheduling physicals, diagnostic screenings, immunizations, and other clinical preventive services. They are consistent with national evidence-based guidelines from CDC, the U.S. Preventive Services Task Force, and guidelines promulgated by other specialty societies. You can request a complimentary copy of these guidelines on an 18" x 36" poster from the Foundation for Healthy Communities by calling (603) 225-0900, or download them from the web at www.healthynh.com.

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# **Information Regarding Physicians Signing Death Certificates:**

All New Hampshire physicians are reminded that death records must be completed and signed by the attending physician and filed with the bureau of vital records and health statistics within 36 hours of the patient's death and prior to the deceased's final disposition or entombment.

Under RSA 290:1, the physician attending the death of a patient may either complete and deliver a signed death record to the funeral director, town clerk, next of kin or designated agent, or file a death record electronically with the bureau of vital records and health statistics. Rule He-P 7006.01 requires the death record to be filed within 36 hours with the bureau of vital records and health statistics, whether it be filed by the physician, funeral director, next of kin or agent. This means that if the physician is not going to make the final filing with the bureau, the physician portion of the death record must be completed and signed in a time frame that allows the party responsible for the next step to comply with the 36 hour deadline.

Rule He-P 7006.01 requires the pronouncing physician to register the following information: name of the deceased; date and time of death (exact, approximated, or unknown); the official capacity of the physician; the date pronounced; certification of truthfulness; name and title of the individual pronouncing death; physician's N.H. license number; whether referral to medical examiner was made; and the name and address of the physician responsible for determining the cause of death, as well as the required details of the cause of death and injuries associated with the death. An attending or certifying physician may also have to provide information for a supplemental death certificate.

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#### Hospital Reporting Criteria Relative to RSA 151:6-b, Effective September 9, 2001:

The Board of Medicine at the request and with the assistance of representatives from hospitals, health care facilities and other employers of physicians in NH has formulated the following written guidelines of which actions represent disciplinary or adverse action that must be reported to the Board of Medicine under statute RSA 151-6-b (Report of Disciplinary Action).

Reportable disciplinary or adverse action include reduction, restriction, suspension, revocation, termination or denial of clinical privileges or medical staff appointment or employment unless the change is voluntary because of the licensee's desire to limit practice but not as a result of a past clinical quality of care issue. The acceptance of a physician's surrender or restriction of clinical privileges or medical staff appointment while under investigation for possible professional incompetence or improper professional conduct, or in return for not conducting such an investigation or proceeding is also reportable. Suspension of a physician's privileges or disciplinary actions resulting from the following are not reportable: failure to timely complete medical records unless the suspension is the third within the calendar year for failure to timely complete medical records; failure to attend meetings; failure to meet administrative standards, i.e. suspensions for DEA expirations or lapse of malpractice insurance coverage or failure to have PPD testing.

A voluntary corrective action as a formal course, additional training etc. would not be reportable while required or mandated corrective action (course, training) is reportable. Informal action, such as a first time letter of warning by a department head, recommending a physician to the Physician Health Program, or a course is not reportable. However, if an action goes through the credentialing, clinical affairs or executive committee, it should be considered a formal adverse action and is reportable. It is hoped that these distinctions will give health care facilities leverage in encouraging physicians to take voluntary corrective steps. The Board supports pro-active corrective action and hopes these criteria will encourage correction without the need for disciplinary actions. Any formal disciplinary action against the physician relating to professional ethics, medical incompetence, moral turpitude or drug or alcohol abuse must be reported.

Recognizing that criteria for trainees should be different to facilitate the education process without being prejudicial to the trainee's future career, separate guidelines have been established for persons holding trainee licenses. Trainees with a recognized problem, remedial plan, verbal or written notice regarding this problem do not need to be reported unless there was gross or repeated negligence which resulted in the harm of a patient. Trainees who fail to meet the goals of the remedial plan, and therefore are put on probation, or are formally suspended from the program, or are dismissed, and/or as a result of any such action are not reappointed shall be

reported. Behavior incompatible with the role of a physician including illegal, immoral or unethical behavior shall also be reported to the Board of Medicine.

The Board of Medicine will not take action on every hospital report. The Board will take action when it feels the public is at risk.

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# **DISCIPLINARY ACTIONS:**

The following final disciplinary actions were taken by the Board from April 1, 2002 through December, 2002.

# Paul Weinstein, M.D. License #10850 North Andover, MA

3/10/00 – Order. License granted with restrictions to include a monitoring of medical practice for 12 months. 4/12/02 – Order Amending Order Dated March 10, 2000. Paragraph A of the Order dated 3/10/00 was amended.

# Jens H. Lauridsen, M.D. Seabrook, NH

4/19/02 - Order of Conditional Denial. Applicant must request a hearing to show cause why he should not be denied a license within thirty (30) days.

# Peter B. Hope, M.D. License #3573 - Moultonboro, NH

5/1/02 - Emergency Suspension. Alleged sexual relations with a patient.

# Arnold R. Miller, M.D. License # 7358 - Laconia, NH

5/7/02 - Settlement Agreement. Allegations of professional misconduct. Reprimanded and fined \$500.00.

# Dennis S. Badman, M.D. License #8928 - Sanbornville, NH

5/8/02 - Settlement Agreement. Allegations of professional misconduct.

Inappropriate prescriptive practices. Reprimanded and restricted from prescribing Schedule II drugs until he successfully completes all conditions contained in the agreement.

#### Lawrence R. Jenkyn, M.D. License #6517 - Lebanon, NH

5/8/02 - Settlement Agreement. Prescriptive practices and documentation. Stayed suspension. Fine.

# Deborah A. Glazer, M.D. License #7117 - Lebanon, NH

5/10/02 - Settlement Agreement. Professional misconduct. Reprimanded and restricted to labor management only under supervision of a licensed obstetrician until obstetric privileges at APDMH are reinstated. 08/13/02 - Order Removing Restriction. Dr. Glazer has complied with the terms of the Settlement Agreement and the Board grants Dr. Glazer's request to remove the restrictions set forth in paragraph 6B of the Settlement Agreement.

#### Thomas W. Creighton, M.D. License #7213 – Bradford, VT

5/14/02 - Settlement Agreement. Restricted license. Transferred to inactive license. License to remain inactive, until all criteria are met.

#### Walter J. Wrobleski, M.D. Yarmouth, ME

3/8/02 – Order of Conditional Denial. Locum Tenens License denied. Does not meet requirements. 6/19/02 - Order. Dr. Wrobleski withdrew his application for Locum Tenens License.

#### Karen L. DeJoe, D.O. License #: 10269 - Manchester, NH

6/20/02 - Order of Conditional Denial. Board denied Dr. DeJoe's renewal application. Dr. DeJoe had until 4:00 P.M., July 19, 2002 to request a hearing.

# Charles L. Ward, Jr., M.D. License #: 3370 - Concord, NH

07/15/02 - Settlement Agreement. Failed to treat and follow patients with dyslipidemia and to implement or adjust drug therapy in a manner consistent with the standard of care.

# Bradley N. Libenson, M.D. License #: 10305 - Concord, NH

08/12/02 - Settlement Agreement. Dr. Bradley N. Libenson committed professional misconduct by his failure to abide by the terms of an order issued by the NH Board of Medicine on June 10, 1998, contrary to RSA 329:117, VI (i).

# D. Brian Shea, M.D. License #: 9714 – Manchester, NH

09/13/02 – Settlement Agreement. Physician with history of substance abuse suffered a relapse on July 1999. Reprimand, five-year mandatory participation in N.H. Medical Society's Physician Health Program; abstain from narcotics and unprescribed mood altering drugs; and prohibition from self-prescribing.

# **CORRECTIONS FROM THE JULY, 2002 NEWSLETTER:**

#### Louis J. Nackman, M.D. License #9740 - Manchester, NH

2/22/02 - Settlement Agreement - Reprimand and \$3,000.00 fine. Committed unprofessional conduct in his care of a patient.

# Sankar N. Banerjee, M.D. - License #8871

1/15/02 - Order - Application for reinstatement of license denied.

Inadvertently in the July, 2002 Newsletter, the license number of Sikhar N. Banerjee, M.D. was indicated for Sankar N. Banerjee, M.D. under this section. The Board apologizes for any inconvenience this has caused Dr. Sikhar N. Banerjee.

The Board has also issued 45 confidential letters of concern, pursuant to RSA 329:17, VII-a, from April 1, 2002 through December, 2002. These letters advise the licensee that while there is insufficient evidence to support disciplinary action, the Board believes the physician should modify or eliminate certain practices, and that continuation of the activities which led to the information being submitted to the Board may result in action against the licensee's license. These letters are not released to the public or any other licensing authority, except that the letters may be used as evidence in subsequent disciplinary proceedings by the Board. 103 Consumer Complaints and 127 Writs from the Courts were received during that time frame.

• The Board office has been called for requests of further details about certain disciplinary actions. All Orders are public documents and may be obtained by calling the Board office at (603) 271-1203. There is a fee of \$.25 per page for all Orders.